

SECTION	INITIAL	ID NO.	DATE
FEE DETERMINATION	ELIZA		05-10-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	U	JCL708	5-7(40)
RESPONSE FORMALITY REVIEW			

JCL708

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
3	5
4	5
5	12
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7	1
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26	11
27	11
28	✓
29	=
30	X
31	11
32	11
33	11
34	11
35	11
36	X
37	11
38	11
39	=
40	X
41	11
42	11
43	=
44	X
45	11
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47	11
48	X
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50	X

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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